

Tire Transporter Permit Form

Business Information				
Transporter Business Name:				
Name of Owner/Manager/Agent:	Owner/Manager/Agent Principal Business or Occupation:			
Business Mailing Address:	Business Address Where Records Will Be Maintained:			
Physical Address: (If different from Business Add	ress)			
City:	State: Zip Code:			
	Description of Truck(s)			
#1 Manufacturer:				
Year of Manufacture:				
Gross Weight:				
License #:				
Color:				
Vehicle Identification Number (VIN) #:				
Registered Owner:				
#2 Manufacturer:				
Year of Manufacture:				
Gross Weight:				
License #:				
Color:				
Vehicle Identification Number (VIN) #:				
Registered Owner:				
#3 Manufacturer:				
Year of Manufacture:				
Gross Weight:				
License #:				
Color:				
Vehicle Identification Number (VIN) #:				
Registered Owner:				
#4 Manufacturer:				
Year of Manufacture:				
Gross Weight:				
License #:				
Color:				
Vehicle Identification Number (VIN) #:				
Registered Owner:				
#5 Manufacturer:				
Year of Manufacture:				
Gross Weight:				
License #:				
Color:				
Vehicle Identification Number (VIN) #:				
Registered Owner:				
Decal # Pe	rmit #:			
	tte Issued:			

Tire Transporter Permit Form Additional Driver Information

		Driver's License #	Has Not Been Revoked in Last 3 Years?	
Name of Driver 1.	Home Address	(State and #)	YESNO	
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.	_			
13.				
14.				
15.				
	No. 1 and 1 and 2			
Notary Information				
	THAT ANY FALSE STATEMENT OR F VOID THIS APPLICATION AND RESI PON THIS APPLICATION.			
TATE OF TEXAS COUNTY OF BEXAR				
EFORE ME, the undersigned and being duly sworn states und	authority on this day personally appear er Oath that all the above and foregoin	ed_ g statement and ea	, and afte ach part thereof is true and correct.	
CKNOWLEDGED BEFORE M	E THIS DAY OF	, IN THE YEAR		

Notary Public, State of Texas